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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

Declaration Submitted with Initial Filing OR Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number	NECI1114 /14919Z
First Named Inventor	Karvel K. Thorner
COMPLETE IF KNOWN	
Application Number	/
Filing Date	Herewith
Group Art Unit	Not Yet Assigned
Examiner Name	Not Yet Assigned

As a below named Inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole Inventor (if only one name is listed below) or an original, first and joint Inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Cast Shadows and Linear Subspaces for Object Recognition

(Title of the Invention)

the specification of which

 is attached hereto

OR

 was filed on (MM/DD/YYYY) as United States Application Number or PCT InternationalApplication Number and was amended on (MM/DD/YYYY) (if applicable)

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT International filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?
			<input type="checkbox"/>	<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>

 Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

[Page 1 of 2]

Burden Hour Statement. This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231

DECLARATION — Utility or Design Patent Application

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Address

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State

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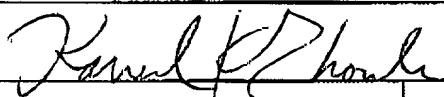
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR : A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any]) Karvel K.

Family Name Thornber
or Surname

**Inventor's
Signature**



Date

10/28/2002

Berkeley Heights

NJ

USA

Residence: City

State

Country

Citizenship

23 Mercier Place

Mailing Address

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City

NJ
State

07922
ZIP

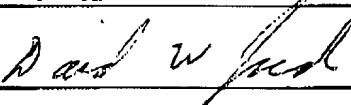
USA
Country

NAME OF SECOND INVENTOR: A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any]) David W.

Family Name Jacobs
or Surname

**Inventor's
Signature**



Date

10/28/02

Princeton

NJ

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Country

Citizenship

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City

NJ
State

08540
ZIP

USA
Country

Additional inventors are being named on the _____ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

Please type a plus sign (+) inside this box →

PTO/SB/81 (02-01)

Approved for use through 10/31/2002. OMB 0651-0035

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	Not Yet Assigned
Filing Date	Herewith
First Named Inventor	Karvel K. Thornber
Title	Cast Shadows and Linear (etc.)
Group Art Unit	Not Yet Assigned
Examiner Name	Not Yet Assigned
Attorney Docket Number	NECI1114 /14919Z

I hereby appoint:

Practitioners at Customer Number
 OR
 Practitioner(s) named below:

Name	Registration Number
Philip J. Feig	27,328
Andrew G. Iszliwan	40,028

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as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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Address			
Address			
City	State	Zip	
Country			
Telephone	Fax		

I am the:

Applicant/Inventor.
 Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name	Karvel K. Thornber		
Signature			
Date	10/28/2002		

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

*Total of 2 forms are submitted.

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I hereby appoint:

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Practitioner(s) named below:

Name	Registration Number
Philip J. Reig	27,328
Andrew G. Isztwan	40,028

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Firm or
Individual Name

Address

Address

City

State

Zip

Country

Telephone

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I am the:

Applicant/Inventor.

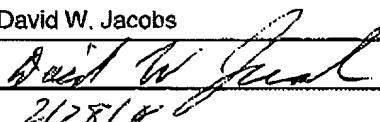
Assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name David W. Jacobs

Signature



Date

2/28/02

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

Total of 2 forms are submitted.

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